



2011 JUL 19 PM 2:53

MISSISSIPPI STATE DEPARTMENT OF HEALTH**BUREAU OF PUBLIC WATER SUPPLY****CALENDAR YEAR 2010 CONSUMER CONFIDENCE REPORT
CERTIFICATION FORM**Dorsey Water Association
Public Water Supply Name0290019 029002
List PWS ID #s for all Water Systems Covered by this CCR

The Federal Safe Drinking Water Act requires each *community* public water system to develop and distribute a consumer confidence report (CCR) to its customers each year. Depending on the population served by the public water system, this CCR must be mailed to the customers, published in a newspaper of local circulation, or provided to the customers upon request.

Please Answer the Following Questions Regarding the Consumer Confidence Report

- ☐ Customers were informed of availability of CCR by: (Attach copy of publication, water bill or other)

☒ Advertisement in local paper
☐ On water bills
☐ Other _____

Date customers were informed: 6/29/11

- ☐ CCR was distributed by mail or other direct delivery. Specify other direct delivery methods:
Date Mailed/Distributed: / /

- ☒ CCR was published in local newspaper. (Attach copy of published CCR or proof of publication)

Name of Newspaper: Itawamba County Times

Date Published: 6/29/11

- ☐ CCR was posted in public places. (Attach list of locations)

Date Posted: / /

- ☐ CCR was posted on a publicly accessible internet site at the address: www.

CERTIFICATION

I hereby certify that a consumer confidence report (CCR) has been distributed to the customers of this public water system in the form and manner identified above. I further certify that the information included in this CCR is true and correct and is consistent with the water quality monitoring data provided to the public water system officials by the Mississippi State Department of Health, Bureau of Public Water Supply.

Dwain Duncan, Secretary
Name/Title (President, Mayor, Owner, etc.)

6-30-11
Date

Mail Completed Form to: Bureau of Public Water Supply/P.O. Box 1700/Jackson, MS 39215
Phone: 601-576-7518

570 East Woodrow Wilson • Post Office Box 1700 • Jackson, Mississippi 39215-1700
601/576-7634 • Fax 601/576-7931 • www.HealthyMS.com

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PROOF OF PUBLICATION

STATE OF MISSISSIPPI
COUNTY OF ITAWAMBA

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Before the undersigned, a Notary Public
in and for said state and county, Charlotte Wolfe
general manager of the

ITAWAMBA COUNTY TIMES

a newspaper published
in the Town of Fulton, in said county and state, makes oath that the
Annual Drinking Water Report
of which the article hereunto attached is a true copy, was published in said
newspaper as follows:

Volume 110, No. 26, Date June 29, 2011
Volume _____, No. _____, Date _____ 20____
Volume _____, No. _____, Date _____ 20____
Volume _____, No. _____, Date _____ 20____
Volume _____, No. _____, Date _____ 20____

And I hereby certify that the issues above mentioned have been
examined by me, and I find the publication thereof to have been duly made,
and that the Itawamba County Times has been established, published and
had a bona fide circulation in said city, county and state for more that one
year next proceeding the first date written above.

Charlotte Wolfe

General Manager

Subscribed before me this the 29 day
of June, 2011
ID # 25148
SANDRA NEWTON
Commission Expires
April 26, 2012
ITAWAMBA COUNTY